# **Final Report**

# **EPIQ Slovakia Environmental Health Component**

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Environmental Policy and Institutional Strengthening Indefinite Quantity Contract (EPIQ)

\*Partners:\* International Resources Group. Winrock International,

\*And Harvard Institute for International Development

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## 1. Introduction

The Health Component in Slovakia activities was led by Dr. Eliot Pearlman, a Project Associate at the Harvard Institute for International Development and the Senior Environmental Health Advisor (SEHA) for EPIQ. As was the case with the Environment Component, the Health Component built on previous work undertaken by the USAID-funded Central and Eastern Europe Environmental Economics and Policy (C4EP) Cooperative Agreement. Dr. Pearlman was also the resident advisor under the C4EP Project and, as such, provided continuity and stability in the transition to a new program.

The main focus of activity under both C4EP and EPIQ has been **local capacity-building** through the development and delivery of high-level courses in the areas of environmental and occupational health. Under C4EP, much of the training was directed at physicians and other health professionals working within the government health care system. During the final phase of C4EP, the Slovak government enacted legislation requiring private firms to take responsibility for providing occupational and environmental health services to their employees. As a result, the focus of training under the EPIQ project expanded to include private physicians, and the project established strong links with the Private Physicians' Association. Private physicians became a well-represented group at the training courses and, as a result, the project was able to build a bridge between public and private practitioners.

As a new government was elected in Slovakia during the course of the EPIQ project, Ministry of Health officials expressed an interest in having the EPIQ team become involved in the general reform of the health care delivery system. Subsequently, a number of discussions were held on this issue and the feasibility of such participation was evaluated. Because of the serious financial constraints faced by the Slovak health care system, there was particular interest in assessing various types of cost containment. However, given the time remaining available under both the EPIQ task order and USAID's presence in Slovakia, USAID decided not to expand the mandate of the EPIQ team, and the focus of the Health Component remained on capacity building.

A description of activities implemented under each of the capacity-building programs follows. The organization of this section follows the structure of the EPIQ workplan prepared in the summer of 1998.

# 2. Description of Activities

## 2.1 Professional Capacity Building/Institution Building

At the request of the project's local counterparts and in order to provide local health care professionals with an updated, comprehensive reference tool, it was decided to translate a dictionary of epidemiological terms into Slovak. To this end, "A Dictionary on Epidemiological Terminology", by John M. Last, was translated into Slovak by Professor Juraj Cervenka. Prior to publication of the dictionary, a working conference was held during which professionals commented on and revised definitions and examples. The Advisory Board of Slovak Clinical Epidemiologists and various volunteers participated in this exercise. Although publication was not completed before the project end date, 350 hard copies were printed by our colleagues in the Environmental Policy Component this past summer. These copies will be distributed to universities, libraries, and other institutions. Additional prints will be possible depending on demand and funding.

During the final two months of the project, the EPIQ team worked out an agreement with Health Net-Slovakia to put the completed dictionary on the Internet to ensure even wider dissemination. The team also held discussions with the Advisory Board of Slovak Clinical Epidemiologists about publishing an abridged version of the dictionary for clinical epidemiologists and clinicians. However, it was determined that this publication would be too repetitive and that these professionals would benefit from having access to the full dictionary.

The project team was gratified by the results of this program activity and by the enthusiasm demonstrated by the Slovak colleagues involved. Particularly gratifying was the turn out of volunteers from the field of medicine who assisted Professor Cervenka and the Advisory Board in completing the dictionary. It is expected that the dictionary will be widely used by epidemiologists and other health care professionals and that this will serve as a model for other similar translation projects.

## 2.2 Professional Capacity Building/Core Curriculum

In an effort to institutionalize the training activities of the Health Component of EPIQ, the SEHA developed a "train the trainer" program in occupational/environmental health. This effort also grew out of the observation (by expatriate lecturers and consultants in Slovakia) that the methodology for training health care professionals allowed – or even reinforced – passive participation. The SEHA and other EPIQ project colleagues who developed the training program aimed at creating an interactive and participatory curriculum which would engage and stimulate participants so that they, too, develop a passion for training and teaching others.

The "Train the Trainer" course in **Risk Management and Risk Assessment** was taught **March 29-31** by <u>Dr. Alan Eschenroeder</u>, Principal, Alanova, Inc. and Faculty, School of Public Health, Harvard University. The course, taught in a computer room at the Slovak Postgraduate Academy of Medicine, provided computer-based instruction and computer training tools, including the

distribution of software after the course, for environmental health risk assessment. The course was attended by 28 participants, most of whom were personnel from the Slovak Institutes of Public Health. Dr. Eschenroeder was supported in his courses by Slovak colleagues with advanced training (from previous EPIQ courses) who acted as Teaching Assistants. The participants are expected to utilize their knowledge to become trainers and received trainers' manuals and computer software to assist them in future training activities. The course was well received by participants who evaluated the instruction and methodology of the training. Trainees cited the hands-on training as particularly valuable for their future needs.

The "Train-the Trainer" course in "Methods in Applied Epidemiology" taught at the Faculty of Medicine in Bratislava June 7-11, 1999 by Dr. Carol Bigelow, Associate Professor of Biostatistics, University of Massachusetts, Amherst and Dr. Kenneth A. Mundt, Associate Professor of Epidemiology, University of Massachusetts, Amherst. Twenty-six participants, including representatives of all eight regional Departments of Public Health in Slovakia, This course followed two previous courses, Occupational participated in this course. Epidemiology (June 1998) and an introduction to computer methods used in the analysis of occupational epidemiology data (September 1998). More recently, a survey of regional and local public health officials helped identify additional areas of interest in training of statistical methods of epidemiological research. The current course, "Methods in Applied Epidemiology," was developed to meet this need. In its design, this course sought to provide materials which could be used in subsequent courses taught by our colleagues in Slovakia per the "train-the-trainer" model. The course mixed lectures, discussions of real studies, and computer laboratory work. On four of the five days, the class began with a review of an epidemiological study design (e.g. case control) and an introduction of the application of the day (e.g. a study of the factors influencing participation on repeat mammographic screening). This was followed by a lecture and discussions on relevant biostatistical methods, with discussion of the results from the study conducted in the morning so students could see applications of the relevant biostatistical methods. Then students were asked to prepare computer laboratory exercises. On the fifth day, students were asked to present descriptions of their own research projects and then participated in a roundtable discussion of comments and suggestions for future research.

In addition to presentations of lectures and group discussions, participants received translated and printed copies of most lecture notes and overheads, supplemental exercises, and computer laboratory session instructions. These materials can be used as reference materials or can serve as the basis for developing additional training materials and tools.

The "Train-the-Trainer" course in "Health Economics and Socio-Economic Evaluation: Cost Effectiveness and Cost Benefit Analysis" was taught by <a href="Professor Bernhard Guntert">Professor Bernhard Guntert</a>, Professor of Public Health Management at the University of Bielefeld's School of Public Health, Bielefeld, Germany and <a href="Professor Paolo Rondo-Brovetto">Professor Paolo Rondo-Brovetto</a>, Adjunct Professor of Public Management at Bocconi University, Milan, Italy, <a href="May 31-June 2">May 31-June 2</a>, 1999 at the Institute of Preventive and Clinical Medicine, Bratislava. About 54 participants attended, including staff from the Ministry of Health and the Ministry of Finance. Lectures included topics ranging from the demand and supply of health care services, limitations and opportunities related to applying market principles in heath care, the role of government in health care, government cost-reduction strategies, financing health care systems, socio-economic evaluation (disease costing, cost-minimization)

analysis, cost-effectiveness analysis, cost utility analysis, cost-benefit analysis, quality of life studies). Sessions also included detailed discussion on the problems of costing (direct costs, indirect costs, intangible costs). The last day of the course dealt with valuing the consequences of different alternatives, whether comparing drugs, technologies, treatment strategies, or diagnostic strategies on health care delivery system structures. The teaching approach was based on practical examples and the seminar also included a review of international guidelines for performing socio-economic valuation studies.

#### 2.3 General Practitioner Training Program

"Train-the Trainer" Program of Courses: These courses were developed for future trainers selected from the State Institutes of Public Health, the Institutes of Occupational Medicine, and members of the Private Physicians Association of Slovakia. This broad-based program was divided into two segments: preventive and clinical.

The preventive course, "Occupational Health services Course for General Practitioners: Preventive Occupational Health," was presented April 19-21 in Modra to senior employees of the Slovak State Institute of Public Health, academia, as well as senior representatives of the Private Physicians association and the Occupational Medicine Clinics. Topics of discussion included insurance systems, cost containment and managed care, worker's compensation, disability and occupational health education. This course provided instruction into the occupational and environmental health and safety programs in the United States. Its focus was examining the role of government in promoting protection in the workplace. It examined the legal and regulatory make-up of these programs as they related to the risks. Examination of the role employer's play was also undertaken. This was complemented by examination of Slovak legislation and needs.

The clinical course, "Occupational Health Services Course for General Practitioners: Clinical Occupational Health," was presented June 14-16, 1999 in Modra by Dr. Jonathan Borak and Dr. Mark Upfal. This course was geared toward senior "trainees", employees of the Slovak State Institute of Public Health, academia, as well as senior representatives of the Private Physicians Association and the Occupational Medicine Clinics. Topics of discussion included the US government approach to regulating toxicants, evaluation of work related diseases, strategies for medical surveillance, cumulative trauma-repetitive strain injuries, work related stress, screening for neurotoxicity, and ergonomics in the United States. Its focus was examining the role of government in promoting protection in the workplace. It examined the legal and regulatory make-up of these programs as they related to the risks. Examination of the role employer's play was also undertaken. This was complemented by examination of Slovak legislation and needs.

## 2.4 Professional Capacity Building/Occupational Nursing Training

The Occupational Health Nursing Curriculum Development Course, "Occupational Health Nursing, Dimensions of the Role and Educational Preparation for the Specialty" was held

at Trnava University School of Public Heath, May 24-26, 1999. This school had been given Ministry of Education and University approval to plan and implement a program of studies at the Master's degree level in Occupational Health Nursing. This conference was developed because of the recognized need in the Slovak Republic for enhanced occupational health services and it was developed in a manner consistent with the standards and recommendations of the European Union. Professor Carol Frazier Love, Professor and Program Director, Simmons College, Boston, Massachusetts and Dr. Carol Somers, Simmons College, led discussions on defining a clear role for occupational health nursing and educational preparation for a diversified audience drawn from the health care services industry. Their lectures themes focused on "Occupational Nursing: What does it Mean?" which provided general information on the specialty and "Education of Occupational Health Nurses: How do we do it?" In total, this course was attended by over twenty professional nurses.

### 2.5 Professional Capacity Building/Public Health Training

Other efforts to increase capacity building in the environmental and occupational health care sector included participation by the SEHA and other project colleagues in a number of local events including workshops, conferences, and other meetings. This participation continued over the course of the project and helped build strong relations between the project team and their Slovak counterparts. In October 1998, the SEHA and Mgrs. Krajcovicova and Strelcova attended a seminar on health economics sponsored at Stara Lesna. This presented an excellent opportunity to assess the current status of activities in the health insurance and hospital management fields in Slovakia. In November, project team members met with the President of the Private Physicians Association (Dr. L. Pasztor) to discuss coordinating activities (like training) with the association and other areas for potential interaction. Dr. Pasztor invited the SEHA to present a lecture on Occupational Health and Clinic Management to the Executive Board at their annual meeting in December. Towards the end of the year, the project team also met with a representative from the EC to discuss the state of health care in Slovakia and to determine if there were any areas of potential mutual collaboration. The exchange of information proved useful at a meeting in December and subsequent follow-up meetings in 1999. In January, and indeed on a regular basis throughout 1998-99, project colleagues met with counterparts from VOCA to discuss rural health issues and possible solutions to the problem of information gaps and advocacy. Throughout the course of the project, the SEHA provided a number of briefings to representatives from USAID, the US State Department, the Canadian Embassy, and other stakeholders concerning progress in training and other activities and updates on changes in legislation and other aspects of the health sector. In March of this year, the project team continued meetings with the Private Physicians Association with a detailed discussion of primary health care, health care reform, and social involvement in community activities. The SEHA and another project colleague also met with the Director of the University Hospital at Koscice to discuss the process of issuing credentials for health care providers in the United States. This information will help Slovak officials and advisors address new proposals for credentialling physicians. A team of local advisors collected information from the EU, as well as from the project team. In May, the team met with officers of Bank Pro Team and Apollo Health Insurance Company concerning post-course activities of the Cost Effectiveness and Cost Benefit Analysis Course presenters. May and June were also busy with project completion activities,

including final transfer of all necessary information and knowledge to Slovak counterparts and the physical close out of the project (on June 30). During June, the project staff also ensured that computer training had been completed for all Slovak counterparts.

Overall, it can be stated with confidence that the activities under the Health Component of EPIQ in Slovakia – the most important of which was training – were completed successfully and to the general satisfaction of Slovak government officials and health care professionals who were affected by the program.

In a final nod of approval to the SEHA and the EPIQ project overall, Trnava University named Dr. Pearlman a Visiting Professor, enabling him to continue his teaching activities after the end of this project. This appointment concluded several months of successful interaction between the EPIQ project and Slovak counterparts.